| Please type vlus sign (+) inside this box | \Rightarrow | 1+1 | | · |
|--|--------------------|-------------|----------------------|---|
| <i>a</i> | | ت | | PTO/SB/29 (1/98) |
| ≡ _ | | | | Approved for use through 09/30/00. OMB 0651-0032 |
| ≣ 🙊 | | • • | • | Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE |
| Unden the Paperwork Reduction Act of 1995, no pe | rsons are required | d to respon | d to a collection of | of information unless it displays a valid OMB control number. |
| | | | | |

| o | | Attorney Docket | • | TNCR.1820 | | ness it displays a valid ONLD COINTO | | |
|--|--|--|--|---|---|---|--|--|
| UII | LITY | First Named Inve | | Guoheng Zha | 20 | · | | |
| - | PPLICATION | Application Ident | | er | | | | |
| | MITTAL | Title | | Improved System for Measuring Periodic Structures | | | | |
| (Only for new nonprovisional applications under 37 CFR 1.53(b)) Express Mail Labe | | | el No. | EV 321 716 | 664 US | | | |
| | ICATION ELEME | | ADDRESS TO: Commissioner for Patents Box Patent Application P. O. Box 1450, Alexandria, VA 22313-1450 | | | | | |
| 1. Fee Transmi | ttal Form - see page 2 | of this form. | 6. | | mputer Program | | | |
| 0.4.11 | | | | | | crofiche containing | | |
| 2. Application: Specification: (14 pages) Descriptive title of the Invention, Cross References to Related Applications, | | | frames on each page in accompanying envelope. 7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Copy | | | | | |
| Referen | ce to Microfiche Appearant of the Invention, | | t | o. 🔲 Paper Co | py (identical to c | omputer copy) ty of above copies | | |
| Brief St Brief D | ummary of the Inventi- escription of the Draw d Description | | | _ | | ICATION PARTS | | |
| Detailee | 2 Decempnon | | 8. | Assignment Pa | apers (cover sheet | & documents) pages | | |
| | of the Disclosure (1 pa | pages) age) | | 37 CFR §3.73((combined when Assignee) | | Power of Attorney with Patent Declaration above.) | | |
| 3. ☑ Drawing(s) (35 USC 113) (15 sheets informal / 11 sheets formal) | | | | | ation Document (| . , | | |
| 4. Oath or Declaration (3 pages) | | | | 11. ☐ Information Disclosure ☐ ☐ Copies of IDS Statement (IDS) (pages) Citations/References & ☐ PTO Form 1449 (page) 12. ☒ Preliminary Amendment 4 pages 13. ☒ Return Receipt Postcard (MPEP 503) (should be specifically itemized) | | | | |
| 5. Incorporation By Reference (useable if Box 4b is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein. | | | | Statement status still Is no longe Certified Copy (if foreign price Other: | ty Statement Encl filed in prior appl proper and desire | ication; and d ment(s) | | |
| Continuat Filed on PRIOR APPLI | JING APPLICATION ion Divisional December 20, 2000, CATION INFORMATIONICE ADDRESS | of prior application of prior application of the control of the co | on No. <u>09</u> or Measu | 0/742,029 tring Periodic S | | | | |
| 10. CORRESPON | DENCE ADDRESS | opissi yasi ili agamada ili maliki kikiyi saf T | <u>2011 (2011)</u> | <u> </u> | - N7 C | | | |
| □ Customer Number | r or Bar Code Label | | | 0 | I 🔼 Corresponde | ence address below | | |
| | | 36 | 257 | | | | | |
| Name | ne James S. Hsue Reg. No. 29,545 | | | | | | | |
| Attorneys for | Parsons Hsue & de | Runtz LLP | | _ | | | | |
| Applicant Address City | 655 Montgomery Str San Francisco | | te (| CA Z | Zip Code 941 | | | |
| Country: | United States Te | elephone (415) | 318-116 | 0 Fax | (415) (| 593-0194 | | |

19. Fee calculations.

| CLAIMS | (1) FOR | (2) | | (3) NUMBER | | (4) RATE | | (5) |
|--|-----------------------|------------------|---------|----------------|---|----------|-----------|--------------|
| (Number Filed) | | | | EXTRA | | | | CALCULATIONS |
| | TOTAL CLAIMS | 1 -20 | = | | х | \$18 | н | \$ |
| | (37 CFR 1.16(c)) | | | | L | | | |
| | INDEPENDENT CLAIMS | 1 - 3 | = | | х | \$86 | = | \$ |
| | (37 CFR 1.16(b)) | | | | | | | |
| | MULTIPLE DEPENDENT CI | AIMS (if applica | ble) (3 | 7 CFR 1.18(d)) | + | \$280.00 | 11 | |
| BASIC FEE (37 CFR 1.16(a)) | | | | | | = | \$ 770.00 | |
| Total of above Calculations | | | | | | | = | \$ |
| Reduction by 50% for filing by small entity (Note 31 CFR 1.9, 1.27, 1.28). | | | | | | = | | |
| TOTAL | | | | | | = | \$770.00 | |

| 20. | FEES: |
|-----|-------|
| ZV. | TLLO. |

| A check is en | closed for \$770.00 |
|---------------|---------------------|
|---------------|---------------------|

The Commissioner is hereby authorized to credit overpayments or charge any additional fees required to Deposit Account No. 502664:

| 21. | Other: | | |
|-----|--------|---|------------|
| | NOTE: | The prior application's correspondence address will carry over to this UPA UN correspondence address is provided below. | LESS a new |

| | RRESPONDENCE ADD. | | 36257 | | | w correspondence address below |
|---------|---------------------------|-------------------|----------------|--------|-----|--------------------------------|
| NAME | James S. Hsue, Parsons Hs | ue & de Runtz LLP | · | | | |
| ADDRESS | 655 Montgomery Street, St | iite 1800 | | | , | |
| CITY | San Francisco | STATE | California | ZIP CO | DE | 94111 |
| COUNTRY | U.S.A. | TELEPHONE | (415) 318-1160 | | FAX | (415) 693-0194 |

| 23. SIGNATURE OF APPLICANT, ATTORNEY, OR | AGENT REQUIRED | | | | | | |
|--|-----------------------------------|--|--|--|--|--|--|
| Parsons Hsue & de Runtz LLP | | | | | | | |
| 655 Montgomery S | 655 Montgomery Street, Suite 1800 | | | | | | |
| San Francisco | o, CA 94111 | | | | | | |
| Tel. (415) 318-1160 | Fax. (415) 693-0194 | | | | | | |
| Date: December 29, 2003 | | | | | | | |
| Name James S. Hspe | Reg. No. 29,545 | | | | | | |
| Signature A A | | | | | | | |
| Express Mail/EV \$21 71 664 US | | | | | | | |
| Label No. 4 | | | | | | | |